| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  09766824    |   |   |              |                               |              |                  |              |                   |                        |       |                     |                        |  |
|---|---|---|--------------|-------------------------------|--------------|------------------|--------------|-------------------|------------------------|-------|---------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                                      |   |   |              |                               |              |                  |              | SMALL ENTITY TYPE |                        |       | OTHER THAN          |                        |  |
| TOTAL CLAIMS  |   |   | 12           |                               |              |                  | RA*          | E                 | FEE                    |       | RATE                | FEE                    |  |
| FOR   |   |   | NUMBER FILED |                               | NUMBER EXTRA |                  | BASK         | FEE               | 355.00                 | OR    | BASIC FEE           | 710.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |   |   | 12 minus 20= |                               | • /          |                  | XS           | 9=                |                        | OR    | X\$18=              |                        |  |
| INDEPENDENT CLAIMS  |   |   | 2 minus 3 =  |                               |              |                  | X4           | )=<br>-           |                        | OR    | X80=                |                        |  |
| MU  | LTIPLE DEPEN  | DENT CLAIM P                              | RESENT       |                               |              |                  | +13          | <br>5=            |                        | OR    | +270=               |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2            |   |   |              |                               |              | TOT              | _            |                   | OR                     | TOTAL | 710                 |                        |  |
| 10 John CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)                |   |   |              |                               |              |                  |              |                   | ENTITY                 | OR    | OTHER<br>SMALL      | THAN                   |  |
| 'n  | (Column 1 CLAIMS  |   | 1985. W      | HIGH                          | EST          | (Column 3)       | SMAC         |                   | ADDI-                  |       |                     | ADDI-                  |  |
| AMENDMENT A   |   | REMAINING<br>AFTER<br>AMENDMENT           |              | NUM<br>PREVK<br>PAID          | DUSLY        | PRESENT<br>EXTRA | RAT          | Ē                 | TIONAL                 |       |                     | TIONAL<br>FEE          |  |
|   | Total   | . 12                                      | Minus        | 2                             | 0            |                  | X\$          | 9=                |                        | OR    | X\$18=              |                        |  |
|   | Independent   | · 2                                       | Minus        | 7                             | 3            |                  | X40          | ) <del>-</del>    |                        | OR    | X80=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                      |   |   |              |                               |              |                  |              | 5=                |                        | OR    | +270=               |                        |  |
| 21605   |   |   |              |                               |              |                  | ADDIT.       | TAL<br>FEE        |                        | OR    | TOTAL<br>ADDIT, FEE |                        |  |
| 9   |   | (Column 1)                                |              | (Colu                         |              | (Column 3)       |              | • •               |                        |       |                     |                        |  |
| AMENOMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA | RAT          | Έ                 | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | ·10                                       | Minus .      |                               | 0            | =                | XS:          | =                 |                        | OR    | X\$18=              |                        |  |
|   | Independent   | NTATION OF MI                             | Minus        | DEPENDENT                     | CLAIM        |                  | X40          | ) <u>=</u>        |                        | OR    | X80=                | ·                      |  |
|   |   |   |              |                               |              |                  | +13          | je.               |                        | OR    | +270=               |                        |  |
|   |   |   |              |                               |              |                  | ADDIT.       | TAL               |                        | OR    | TOTAL<br>ADDIT. FEE |                        |  |
|   |   | (Column 1)                                |              | (Coku                         |              | (Column 3)       |              |                   |                        |       |                     |                        |  |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | BEA<br>DUSLY | PRESENT<br>EXTRA | RAT          | ε                 | ADDI-<br>TIONAL<br>FÉE |       | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | •   | Minus        | ••                            |              | ± .              | X\$ 9        | )=                |                        | OR    | X\$18=              |                        |  |
|   | Independent   | •   | Minus        | •••                           |              |                  | X40          | 9                 |                        | OR    | X80=                |                        |  |
|   | FIRST PRESE   | NTATION OF M                              | ULTIPLE C    | DEPENDENT                     | CLAIM        |                  | <del> </del> |                   |                        | -     | +270==              |                        |  |
| If the entry in column 1 is less than the entry in column 2, write "o" in column 3. |   |   |              |                               |              |                  |              |                   |                        |       |                     |                        |  |
| ***1  | "If the Teighest Number Previously Peid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE OR ADDIT. FEE ADDIT. FEE  The Teighest Number Previously Peid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                               |              |                  |              |                   |                        |       |                     |                        |  |

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